



Do you have your NPI? National Provider Identifiers (NPIs) will be required on claims sent on or after May 23, 2007. Every health care provider needs to get an NPI. Learn more about the NPI and how to apply for an NPI by visiting <http://www.cms.hhs.gov/NationalProvIdentStand/> on the CMS web site.

MLN Matters Number: MM5441

Related Change Request (CR) #: 5441

Related CR Release Date: January 19, 2007

Effective Date: July 1, 2007

Related CR Transmittal #: R1157CP

Implementation Date: July 2, 2007

## Processing All Diagnosis Codes Reported on Claims Submitted to Carriers

### Provider Types Affected

All physicians and suppliers who submit claims for services provided to Medicare beneficiaries to carriers or A/B Medicare Administrative Contractors (MACs).

### Provider Action Needed

This article is derived from CR 5441, which announces the requirement that (effective for claims processed July 1, 2007 and later) the Part B standard systems and the carrier claims processing systems capture and process up to eight diagnosis codes on all of your claims (both paper and electronic). You should make sure that your billing staffs are aware of these changes that allow all eight diagnosis codes on Medicare claims effective, July 1, 2007.

### Background

While the ANSI 837P 4010A allows a maximum of eight diagnosis codes to be reported for each claim, the Medicare Part B standard systems and the carrier claims processing systems have historically used only the first four diagnosis codes reported on the claim when processing the HIPAA format claims. Carriers have used a manual process to consider the remaining diagnosis codes in the Medicare payment determinations. The purpose of CR5441 is to finalize the requirement that the Part B standard system and the carrier claims processing systems be modified to process your paper and electronic claims using all diagnosis codes that you report on the claim (up to eight).

#### Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

## Additional Information

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You can find the official instruction, CR5441, issued to your carrier or A/B MAC by visiting <http://www.cms.hhs.gov/Transmittals/downloads/R1157CP.pdf> on the CMS website.

If you have any questions, please contact your carrier or A/B MAC at their toll-free number, which may be found at <http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip>.

### Flu Shot Reminder

It's Not Too Late to Get the Flu Shot. We are in the midst of flu season and a flu vaccine is still the best way to prevent infection and the complications associated with the flu. But re-vaccination is necessary each year because the flu viruses change each year. Encourage your Medicare patients who haven't already done so to get their annual flu shot and don't forget to immunize yourself and your staff. **Protect yourself, your patients, and your family and friends. Get Your Flu Shot. It's Not Too Late!** Remember - Influenza vaccination is a covered Part B benefit. Note that influenza vaccine is NOT a Part D covered drug. For more information about Medicare's coverage of adult immunizations and educational resources, go to CMS's website: <http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0667.pdf> .

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